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Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. Application Number 0/625,526 **CHANGE OF** CORRESPONDENCE ADDRESS Filing Date Application Morton M. Mower First Named Inventor 3762 Art Unit Address to: Commissioner for Patents **Examiner Name** P.O. Box 1450 06809.0031-00000 Alexandria, VA 22313-1450. Attorney Docket Number Please change the Correspondence Address for the above-Identified patent application to: Customer Number: 22,852 lxxl ÓŔ Firm o Individual Name Address Address State City Country Fax Telephone This form cannot be used to change the data associated with a Customer Number. To change the data associated with an existing Customer Number use "Request for Customer Number Data" Change" (PTO/SB/124). I am the: Applicant/Inventor Assignee of record of the entire interest. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). XX Attorney or Agent of record. Registration Number 43.826 Registered practitioner named in the application transmittal letter in an application without an executed oath or declaration. See 37 CFR 1.33(a)(1). Registration Number Typed or Printed Naidich Name Edward Signature Telephone 202.408.4000 Date May 19 2004 NOTE: Signatures of all the inventors or assigneed of record of the entire interest or their representative(a) are required. Submit multiple forms if more than one signature is required, see below forms are submitted.

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